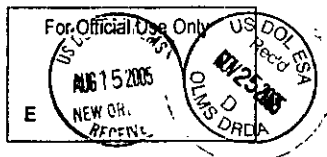


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>13304</u>	2. Fiscal Year Covered From: <u>01 / 01 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>LANCE J ALBIN</u> P.O. Box, Bldg., Room No., if any <u>P.O. Box 8428</u> Street _____ City <u>METairie</u> State <u>LA</u> ZIP Code + 4 <u>70011</u>	4. Name, file number, and address of labor organization. Name <u>PLUMBERS + STEAMPITTERS</u> <u>LOCAL 60</u> Labor Organization File Number <u>037-884</u> P.O. Box, Building and Room Number, if any <u>P.O. Box 8428</u> Street _____ City <u>METairie</u> State <u>LA</u> ZIP Code + 4 <u>70011</u>
5. Position in labor organization. <u>PRESIDENT / BUSINESS MANAGER</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>MECHANICAL CONTRACTORS</u> <u>ASSN. OF N.O.</u> Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any <u>P.O. Box 51238</u> Street _____ City <u>NEW ORLEANS</u> State <u>LA</u> ZIP Code + 4 <u>70151</u>	7.a. Nature of Interest, Transaction, or Income. <u>- MEAL 12/22/04 - 83.00</u> <u>- CHARITY GOLF WITH GREATER</u> <u>NEW ORLEANS BUSINESS</u> <u>ROUNDTABLE 10/21/04 - 60.00</u> 7.b. Amount. <u>143.00</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Lance J Albin</u>	On <u>8/15/05</u> <u>(504) 885-3054</u> Date Telephone Number

Name of Person Filing <u>LANCE J. ALBIN</u>	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

<p>6. Name and address of Employer (including trade name if any).</p> <p>Name <u>NATIONAL Inspection Testing AND CERTIFICATION CORP.</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>501 SHATT O PLACE, Suite 201</u></p> <p>City <u>LOS ANGELES</u></p> <p>State <u>CA</u> ZIP Code + 4 <u>90020</u></p>	<p>7.a. Nature of Interest, Transaction, or Income.</p> <p><u>- GIFT 12/04 - 44.81</u></p> <p><u>- MEAL 3/04 - 31.79</u></p> <p><u>- LARRY THOMAS RETIREMENT DINNER - 31.62</u></p> <p>7.b. Amount.</p> <p align="center"><u>108.22</u></p>
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A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

<p>6. Name and address of Employer (including trade name if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>7.a. Nature of Interest, Transaction, or Income.</p> <p> </p> <p>7.b. Amount.</p> <p> </p>
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A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

<p>6. Name and address of Employer (including trade name if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>7.a. Nature of Interest, Transaction, or Income.</p> <p> </p> <p>7.b. Amount.</p> <p> </p>
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LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, GRANN & LUYE

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any: _____

Street 2540 SEVERN AVE, Suite 400City MEFAIRIEState LA ZIP Code + 4 70002

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name D+S LOCAL UNION No. 60

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any: P.O. Box 8428

Street: _____

City MEFAIRIEState LA ZIP Code + 4 70011

11.a. Nature of such dealing.

LAW FIRM11.b. Approximate dollar value of such dealing. 16,259.72

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95

12.b. Amount.

96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any: _____

Street _____

City _____

State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

LANCE J ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name: ROBEIN, GRANN & LUAYE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street: 2540 SEVERN AVE, Suite 400
City: MEFAIRIE
State: LA ZIP Code + 4: 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name: P+J PENSION PLAN
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street: _____
City: MEFAIRIE
State: LA ZIP Code + 4: 70011

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing. 52,218.46

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY REPORTED)

12.b. Amount. 96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name: _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street: _____
City: _____
State: _____ ZIP Code + 4: _____

14.a. Nature of payment.

13.b. Is the Business an Employer _____ or Consultant _____ ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, GRANN & LUYE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 2540 SEVERN AVE, Suite 400
City MEFAIRIE
State LA ZIP Code + 4 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name P + S WELFARE FUND
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street: _____
City MEFAIRIE
State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing.

39,209.25

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY REPORTED)

12.b. Amount.

96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street: _____
City: _____
State: _____ ZIP Code + 4: _____

14.a. Nature of payment.

13.b. Is the Business an Employer _____ or Consultant _____ ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, GRANN & LUYE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 2540 SEVERN AVE, Suite 400
City MEFAIRIE
State LA ZIP Code + 4 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name P45 LOCAL UNION NO. 60
VACATION FUND
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street _____
City MEFAIRIE
State LA ZIP Code + 4 70017

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing. 13.95

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY REPORTED)

12.b. Amount. 96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer _____ or Consultant _____ ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIR, GRANN & LUYE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 2540 SEVERN AVE, Suite 400
City METairie
State LA ZIP Code + 4 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name PYS LOCAL NO. 00 401K PLAN
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street _____
City METairie
State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing.

8,926.40

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY REPORTED)

12.b. Amount.

96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer _____ or Consultant _____ ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, GRANN & LUYE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 2540 SEVERN AVE, Suite 400
City MEFAIRIE
State LA ZIP Code + 4 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name JOINT APPRENTICESHIP TRAINING COMMITTEE
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street _____
City MEFAIRIE
State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing.

1540.16

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY REPORTED)

12.b. Amount.

96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name: ROBBIN, GRANN & LUYE
 Trade Name, if any: _____
 P.O. Box, Bldg., Room No., if any: _____
 Street: 2540 SEVERN AVE, Suite 400
 City: MEFAIRIE
 State: LA ZIP Code + 4: 70002

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name: LABOR MANAGEMENT COLOP COMMITTEE
 Trade Name, if any: _____
 P.O. Box, Bldg., Room No., if any: P.O. Box 8428
 Street: _____
 City: MEFAIRIE
 State: LA ZIP Code + 4: 70011

11.a. Nature of such dealing.

LAW FIRM

11.b. Approximate dollar value of such dealing.

- 0 -

12.a. Nature of interest held or income received.

- CHARITY GOLF TOURNAMENT
6-4-04 - 60.00
- CHRISTMAS GIFT - 36.95
(AS PREVIOUSLY Reported)

12.b. Amount.

96.95

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name: _____
 Trade Name, if any: _____
 P.O. Box, Bldg., Room No., if any: _____
 Street: _____
 City: _____
 State: _____ ZIP Code + 4: _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

Name of Person Filing	LANCE T. ALBIN	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>DAVIS HAMILTON JACKSON ASSOC.</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>#2 HOUSTON CENTER, 909 FANNIN</u> <u>SUITE 550</u></p> <p>City <u>HOUSTON</u></p> <p>State <u>TX</u> ZIP Code + 4 <u>77010</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>PLUMBERS & STEAM FITTERS</u> <u>PENSION PLAN</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <u>P.O. BOX 8428</u></p> <p>Street _____</p> <p>City <u>METairie</u></p> <p>State <u>LA</u> ZIP Code + 4 <u>70011</u></p>	<p>11.a. Nature of such dealing.</p> <p><u>INVESTMENT MANAGER</u> <u>FOR PENSION FUND</u></p> <p>11.b. Approximate dollar value of such dealing. <u>87,837.20</u></p>
	<p>12.a. Nature of interest held or income received.</p> <p><u>-MEAL 12/4/04 \$101.00</u> <u>I.F. DINNER Reception</u></p> <p>12.b. Amount. <u>101.00</u></p>

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name DEARBORN PARTNERS
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 200 W. MADISON, Suite 1950
City CHICAGO
State IL ZIP Code + 4 60606

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name PLUMBERS & STEAM FITTERS
PENSION PLAN
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. BOX 8428
Street _____
City METairie
State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

INVESTMENT MANAGER FOR
PENSION FUND

11.b. Approximate dollar value of such dealing.

13,787.77

12.a. Nature of interest held or income received.

- MEAL 10/18/04 112.58

12.b. Amount.

112.58

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name INVESTMENT PERFORMANCE SCRIP
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street 7402 HODGSON MEMORIAL DR.
City SAVANNAH
State GA ZIP Code + 4 31406

9. Business deals with:

- ☐ a. Labor Organization
☒ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name PKS LOCAL PENSION PLAN
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: P.O. Box 8428
Street: _____
City MEMPHIS
State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

INVESTMENT
CONSULTANT FOR PENSION
FUND

11.b. Approximate dollar value of such dealing. 75,000.00

12.a. Nature of interest held or income received.

- MEAL	6/1/04	85.03
- MEAL	8/31/04	98.75
- MEAL	12/7/04	90.11

12.b. Amount. 268.89

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____
Trade Name, if any: _____
P.O. Box, Bldg., Room No., if any: _____
Street _____
City _____
State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

Name of Person Filing <u>LANCE J. ALBIN</u>	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>JANUS INSTITUTIONAL</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>151 DETROIT ST.</u></p> <p>City <u>DENVER</u></p> <p>State <u>CO</u> ZIP Code + 4 <u>80206</u></p>	<p>9. Business deals with:</p> <p>____ a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>____ c. Employer</p>						
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>PLUMBERS + STEAM FITTERS PENSION PLAN</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <u>P.O. BOX 8428</u></p> <p>Street _____</p> <p>City <u>METairie</u></p> <p>State <u>LA</u> ZIP Code + 4 <u>70011</u></p>	<p>11.a. Nature of such dealing.</p> <p align="center">INVESTMENT MANAGERS FOR PENSION FUND</p> <hr/> <p>11.b. Approximate dollar value of such dealing. <u>57,910.84</u></p> <hr/> <p>12.a. Nature of interest held or income received.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">- MEAL</td> <td style="width: 20%;">7/26/04</td> <td style="width: 20%; text-align: right;">26.00</td> </tr> <tr> <td>- MEAL</td> <td>6/01/04</td> <td style="text-align: right;">45.00</td> </tr> </table> <hr/> <p>12.b. Amount. <u>71.00</u></p>	- MEAL	7/26/04	26.00	- MEAL	6/01/04	45.00
- MEAL	7/26/04	26.00					
- MEAL	6/01/04	45.00					

LANCE J. ALBIN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PLUMBERS & STEAMFITTERS EDUCATION TRUST

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any P.O. Box 8428

Street: _____

City METairie

State LA ZIP Code + 4 7011

9. Business deals with:

- ☒ a. Labor Organization
☐ b. Trust
☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name PLUMBERS & STEAMFITTERS LOCAL 60

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any P.O. Box 8428

Street: _____

City METairie

State LA ZIP Code + 4 70011

11.a. Nature of such dealing.

UNION is CO-SPONSOR OF TRUST FUND

11.b. Approximate dollar value of such dealing.

542,721.56

12.a. Nature of interest held or income received.

- REGISTRATION N. AMERICAN PIPE TRADERS CONF. HOLLYWOOD, FL. 5/21/04 - 350.00
- INSTRUCTOR TRAINING PROGRAM - MEAL GRADUATION 8/12/04 100.00
- INSTRUCTORS ANNUAL DINNER MEETING 12/18/04 61.00

12.b. Amount.

511.00

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name _____

Trade Name, if any: _____

P.O. Box, Bldg., Room No., if any _____

Street _____

City _____

State _____ ZIP Code + 4 _____

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.